Atty. Dkt. No. 038440-0105

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Jun KITAKADO

Title:

ADAPTIVE ARRAY RADIO COMMUNICATION APPARATUS,

ANTENNA CORRELATION DISPLAY METHOD, ANTENNA

CORRELATION ADJUSTMENT METHOD, ANTENNA CORRELATION DISPLAY PROGRAM, AND ANTENNA

CORRELATION ADJUSTMENT PROGRAM

Appl. No.:

Unassigned

Filing Date:

February 18, 2004

Examiner:

Unassigned

Art Unit:

Unassigned

# UTILITY PATENT APPLICATION **TRANSMITTAL**

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

### Jun KITAKADO

### Enclosed are:

- Application Data Sheet (37 CFR 1.76) (2 pages). [X]
- Specification, Claim(s), and Abstract (25 pages). [X]
- [X]Formal drawings (5 sheets, Figures 1, 2A, 2B, 2C, 3-5).
- [X] Declaration and Power of Attorney (3 pages).
- [X] Assignment of the invention to Sanyo Electric Co., Ltd.

- [X] Assignment Recordation Cover Sheet.
- [X] Claim for Convention Priority and Priority Document.
- [X] Information Disclosure Statement (2 pages)
- [X] Form PTO/SB/08 with copies of 2 listed references.

## The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee			Dasic ree				\$770.00	_	\$770.00
Total	20	_	20	=	0	x	\$18.00	= '	\$0.00
Claims:							•		*
Independents	6	-	3	=	3	X	\$86.00	=	\$258.00
:									
If any Multipl	e Depender	nt Cl	aim(s) pres	ent:		+	\$290.00	=	\$0.00
							SUBTOTAL:	=	\$1028.00
[ ]		Sn	nall Entity l	Fees	Apply (	subtra	act ½ of above):	=	\$0.00
					T	OTA	L FILING FEE:	=	\$1,028.00
Assignment R			+	\$40.00	=	\$40.00			
TOTAL FEE								_=	\$1,068.00

- [X] A check in the amount of \$1,068.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: February 18, 2004

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